Capuon of Case)  Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo  Request to Cancel Class C Taxi Certificate  Erskine Carter DBA Carter Transportation	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  TRANSPORTATION COVER SHEET  DOCKET NUMBER: 2008 - 32 - T
	<ul> <li>If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.</li> </ul>
(Please type or print)  Submitted by: Easking Carter	Telephone: 203-290 3531
CrangEburgE, SC 99115	Other:
NOTE: The cover sheet and information contained herein neither repl as required by law. This form is required for use by the Public Service be filled out completely.	aces nor supplements the filing and service of pleadings or other papers ce Commission of South Carolina for the purpose of docketing and must
	ON (Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request
Application - Class C Stretcher Van	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificat of Public Convenience and Necessity to be Rescinded	Reservation Letter 60 0
X Request for Cancellation of Certificate	Response
Request for Suspension	Other:
Request for Reinstatement	
	•

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

**Print Form** 

Reset Form

## Request for Cancellation of Certificate

File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE:	
Please consider this a request to cancel r	my:
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	
Class C Charter Bus Certificate	
Non-Emergency Certificate	
Class E Household Goods Certificate	
Class E Hazardous Wastes Certificate	
My Certificate Number is 7926-B	
ERSKINE CARTER	CARTER TRANSPORTATION DBA
(Name of Company)	(If applicable)
1249 GLENWOOD DRIVE	
(Street Address)	(Mailing Address if different from Street Address)
ORANGEBURG, SC 29115	
(City, State, Zip Code)	(City, State, Zip Code)
(A) 2 290-3531	
(Telephone Number)	A Empli
	(Signature)
(	DEnskine Carter,
•	(Title) Owner, President, etc.
	ORS Revised 2-18-10